City of Portland, M	1aine - Buil	ding or Use	Permi	t Applicatio	n Pe	rmit No:	Issue Date	;	CBL:	
389 Congress Street,	04101 Tel: (207) 874-8703	, Fax:	(207) 874-87	16	08-1419	1115	08_	398 A0	03001
Location of Construction: Owner Name:				Owner Address:		-11		Phone:		
17 SUMMIT ST		VIOLETTE M	1ARCE	L HEIRS	17 S	SUMMIT ST	•			
Business Name:		Contractor Name	:		Contr	actor Address:			Phone	
		Down East En	ergy		172	Main Street S	South Portla	ınd	20779955	85
		Phone:				it Type:			Zone:	
				Ì	Tan	ıks - Dwelling	gs			
Past Use:		Proposed Use:		<u> </u>	Perm	it Fee:	Cost of Wor		CEO District:	<u> </u>
2 Family Home		2 Family Home - install a 120 gallon propane tank						30.00		
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							Approved		roup: R -3	Type: 5B
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Proposed Project Description					-				- p+111	<i>)</i> •
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					Actio	on: Appro	ved App	proved w	/Conditions	Denied
					Signa	ntura:			Date:	
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Permit Taken By: ldobson	-	oplied For: 5/2008				Zoning	Approva	al		
			Spe	cial Zone or Revi	ews	Zoni	ng Anneal		Historic Pres	
1. This permit applica		•	Special Zone or Review		CWS	vs Zoning Appeal			1 _	
Applicant(s) from meeting applicable St		able State and	d Shoreland		☐ Variance				Not in District or Landman	
Federal Rules.										
2. Building permits do not include plumbing,		olumbing,	Wetland			Miscellaneous			Does Not Require Review	
septic or electrical	work.									
3. Building permits are void if work is not started		Flood Zone			Conditional Use			Requires Review		
within six (6) mont										
False information may invalidate a building		a building	Su	ıbdivision	Interpretation			Approved		
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I hereby certify that I am	the owner of	record of the na				nosed work is	s authorized	hv the	owner of recor	d and that
I have been authorized b										
jurisdiction. In addition										
shall have the authority t										
such permit.		-	-	•			=			
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SIGNATURE OF APPLICAT	41			ADDRES	3		DATE		PHO	INE.
RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE					DATE				PHONE	

FAX



To: andrea
Fax Number: 799 · 5589
From: Coly of Poseland, Unexpections
Fax Number:
Date: 11/5/08
Regarding: LYNC Resmit
Total Number Of Pages Including Cover:
Phone Number For Follow-Up:

Comments:

City Of Portland, Maine
Inspections Division Services
389 Congress St Room 315 Portland Me 04101-3509
Phone: (207) 874-8703 or (207)874-8693

Fax: (207) 874-8716

http://www.portlandmaine.gov/ .

City of Portland, Ma	aine - Buil	lding or Use	Permi	t Applicatio	ո [բ	ermit No:	Issue Date	;	CBL:	
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Location of Construction: Owner Name:		<u> </u>		Owner Address:		11		Phone:		
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Business Name:		Contractor Name	e:		Con	tractor Address:	_		Phone	
		Down East Er	nergy		172	2 Main Street S	South Portla	ınd	2077995	585
Lessee/Buyer's Name		Phone:				nit Type:				Zone:
·						nks - Dwelling	gs			
Past Use:		Proposed Use:		J		mit Fee:	Cost of Wor	·k·	CEO District:	<u> </u>
2 Family Home		2 Family Home - install a 120 gallon propane tank			'			30.00		
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					Acti	on: Approv	ved App	oroved w	/Conditions	Denied
					Sign	ature:			Date:	•
Permit Taken By:	Date An	plied For:					Annmone	.1	-	
ldobson	1	7/2008				Zoning	Approva	ш		
1. This permit applicati			Spec	cial Zone or Revi	ews	Zonii	ıg Appeal	I	Historic Pres	ervation
1. This permit applicati Applicant(s) from mo			Shoreland			Variance			Not in District or Landmar	
Federal Rules.	seemg appire	uoto stato ana		orcianu		variance	Ū		Not in Distric	ot Of Calidillat
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septic or electrical work. 3. Building permits are void if work is not started within six (6) months of the date of issuance. False information may invalidate a building permit and stop all work			Flood Zone			Conditional Use			Requires Review	
			☐ Sul	odivision		☐ Interpretation			Approved	
	-		Site	e Plan O , J	-	Approve	d		Approved w/0	Conditions
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	OF PORT	LAND I								
			CI	ERTIFICATI	ON					
hereby certify that I am th	ne owner of r	ecord of the nar	ned pro	perty, or that th	ne proi	posed work is	authorized	by the o	owner of record	d and that
have been authorized by t										
urisdiction. In addition, if										
shall have the authority to	enter all area	s covered by su	ch perm	it at any reasor	iable h	nour to enforce	the provis	ion of	the code(s) app	olicable to
such permit.										
SIGNATURE OF APPLICANT				ADDRESS	3		DATE		PHON	1E
DECDONICIDE E DEDGOVEN CE	LADOE OF WO	NDV TITLE					DATE		DITO	IE
RESPONSIBLE PERSON IN CI	1AKUL UF WC	MK, HILE					DATE		PHON	NL

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE



APPLICATION FOR PERMIT HEATING OR POWER EQUIPMENT

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To the INSPECTOR OF BUILDINGS, PORTLAND, ME.

The undersigned hereby applies for a permit to insta accordance with the Laws of Maine, the Building Code of the	all the following heating, cooking or power equipment in the City of Portland, and the following specifications:
Name and address of owner of appliance Dan Hatt Port and Me Installer's name and address Fortanconly D	Use of Building HOME Date 11508 17 SUMMITST. Telephone 799-555
Location of appliance: Basement Roof	Type of Chimney: Masonry Lined Factory built
Type of Fuel: Gas Oil Solid Appliance Name: COCY LOF FIRE PACE U.L. Approved Yes No	Direct Vent Type UL#
Will appliance be installed in accordance with the manufacture's installation instructions? Yes No No No No	Type of Fuel Tank Oil Gas NOV Size of Tank
The Type of License of Installer: Master Plumber # Solid Fuel # Oil # Gas # Other	Number of Tanks Distance from Tank to Center of Flame 30 feet. Cost of Work: \$ Permit Fee: \$
Approved Fire: Ele.: Bldg.: Signature of Installer	Approved with Conditions See attached letter or requirement Inspector's Signature Date Approved

White - Inspection

Yellow - File

Pink - Applicant's

Gold - Assessor's Copy

Permit No: Date Applied For: CBL: City of Portland, Maine - Building or Use Permit 08-1419 11/05/2008 398 A003001 389 Congress Street, 04101 Tel: (207) 874-8703, Fax: (207) 874-8716 Location of Construction: Owner Name: Owner Address: Phone: 17 SUMMIT ST VIOLETTE MARCEL HEIRS 17 SUMMIT ST Business Name: Contractor Name: Contractor Address: Phone Down East Energy 172 Main Street South Portland (207) 799-5585 Lessee/Buyer's Name Phone: Permit Type: Tanks - Dwellings Proposed Use: **Proposed Project Description:** 2 Family Home - install a 120 gallon propane tank install a 120 gallon propane tank Dept: Zoning 11/05/2008 Status: Approved Reviewer: Chris Hanson Approval Date: Ok to Issue: Note: Dept: Building **Status:** Approved with Conditions Reviewer: Chris Hanson **Approval Date:** 11/05/2008 Ok to Issue: Note: 1) Tanks shall be installed per NFPA 58 2) The installation must comply with the State of Maine Gas Regulations.



Original Receipt

1.5 2003
20
Received from
Execution of Work
Cost of Construction* \$ Building Fee:
Permit Fee \$ 30 Site Fee:
Certificate of Occupancy Ree:
Total: 20
(Building (IL) Plumbing (I5) Electrical (I2) Site Plan (U2)
Other Cark.
CBL: 3/8//3
Check #: Total Collected \$_30
No work is to be started until permit issued. If permit is Withdrawn or Denied, amount of the Refund is based on \$20.00 or 20% of the fee, (whichever is greater)
In order to receive a refund, you <u>MUST</u> present the Original Receipt.
Taken by:
WHITE - Applicant's Copy YELLOW - Office Copy PINK - Permit Copy
₩ww.